

Appendix B

Forms

APPLICATION FOR FEDERAL ASSISTANCE

OMB Approval No. 0348-0043

1. TYPE OF SUBMISSION: <i>Application</i> <input type="checkbox"/> Construction <input type="checkbox"/> Non-Construction		2. DATE SUBMITTED		Applicant Identifier	
		3. DATE RECEIVED BY STATE		State Application Identifier	
4. DATE RECEIVED BY FEDERAL AGENCY		Federal Identifier			

5. APPLICANT INFORMATION					
Legal Name:			Organizational Unit:		
Address (give city, county, state and zip code):			Name and telephone number of the person to be contacted on matters involving the application (give area code)		
6. EMPLOYER IDENTIFICATION (EIN) <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px 0;"></div>			7. TYPE OF APPLICANT: (enter appropriate letter in box) <input type="checkbox"/>		
8. TYPE OF APPLICATION: <input type="checkbox"/> New <input type="checkbox"/> Continuation <input type="checkbox"/> Revision If Revision, enter appropriate letter(s) in box(es): <input type="checkbox"/> <input type="checkbox"/> A. Increase Award B. Decrease Award C. Increase Duration D. Decrease Duration Other (specify): _____			A. State B. County C. Municipal D. Township E. Interstate F. Intermunicipal G. Special District		
			H. Independent School Dist. I. State Controlled Institution of Higher Learning J. Private Industry K. Indian Tribe L. Individual M. Profit Organization N. Other (specify): _____		
10. CATALOG OF FEDERAL DOMESTIC ASSISTANCE NUMBER:			9. NAME OF FEDERAL AGENCY:		
TITLE:			11. DESCRIPTIVE TITLE OF APPLICANTS PROJECT:		
12. AREAS AFFECTED BY PROJECT (cities, counties, states, etc.):					

13. PROPOSED PROJECT:		14. CONGRESSIONAL DISTRICTS OF:	
Start Date	Ending Date	a. Applicant	b. Project

15. ESTIMATED FUNDING:		16. IS APPLICATION SUBJECT TO REVIEW BY STATE EXECUTIVE ORDER 12372 PROCESS? a. YES. THIS PREAPPLICATION/APPLICATIN WAS MADE A VALUABLE TO THE STATE EXECUTIVE ORDER 12372 PROCESS FOR REVIEW ON: DATE _____ b. NO. <input type="checkbox"/> PROGRAM IS NOT COVERED BY E.O. 12372 <input type="checkbox"/> OR PROGRAM HAS NOT BEEN SELECTED BY STATE FOR REVIEW
a. Federal	\$.00	
b. Applicant	\$.00	
c. State	\$.00	
d. Local	\$.00	
e. Other	\$.00	
f. Program Income	\$.00	17. IS THE APPLICANT DELINQUENT ON ANY FEDERAL DEBT? <input type="checkbox"/> Yes If "Yes," attach an explanation. <input type="checkbox"/> No
g. TOTAL	\$.00	

18. TO THE BEST OF MY KNOWLEDGE AND BELIEF, ALL DATA IN THIS APPLICATION/PREAPPLICATION ARE TRUE AND CORRECT, THE DOCUMENT HAS BEEN DULY AUTHORIZED BY THE GOVERNING BODY OF THE APPLICANT AND THE APPLICANT WILL COMPLY WITH THE ATTACHED ASSURANCES IF THE ASSISTANCE IS AWARDED		
a. Typed Name of Authorized Representative	b. Title	c. Telephone number
d. Signature of Authorized Representative		e. Date Signed

Instructions for Completion of the Application for Federal Assistance (SF 424)

The Application for Federal Assistance is a standard form used by most Federal agencies for applications for Federal assistance. This form contains 18 different items, all of which are to be completed before your application is reviewed. The Office of Justice Programs (OJP) cannot accept the application without a completed and signed SF 424.

- Item 1 Type of Submission:** Indicate if this is an application for a construction or non-construction program.
- Item 2 Date Submitted:** Indicate the date you sent the application to OJP. The "Application Identifier" is the number assigned by your jurisdiction, if any, to track applications. If your jurisdiction does not assign an identifier number, leave this space blank.
- Item 3 Date Received by State:** Leave blank. This block is completed by the State single point of contact, if applicable.
- Item 4 Date Received by Federal Agency:** This item will be completed by OJP.
- Item 5 Applicant Information:** The "Legal Name" is the unit of government or the parent organization. For example, the primary or parent organization of a law enforcement agency is the name of the city or township. Thus the city or township should be entered into the Legal Name box and the name of the law enforcement agency would be entered into the Organizational Unit box. One person should be designated as the Contact for the proposed project, and that person's telephone number should also be included. It is not unusual for the name of the contact person to differ from the authorized representative of your agency provided in Item 18.
- Item 6 Employer Identification Number:** Each employer receives an employer identification number from the Internal Revenue Service. Generally, this number can be easily obtained from your agency's accountant or comptroller.
- Item 7 Type of Applicant:** Enter the appropriate letter in this space. If the applicant is representing States organized as a regional compact, specify by checking Block N and entering "regional compact" and identify the participating States.
- Item 8 Type of Application:** Check either "new" or "continuation". Check new if this will be your first award for the purpose described in the application, even if the applicant has received prior awards for other purposes. Check "continuation", if the project will continue activities, including minor modifications, or implement the next phase of a project, that was begun under a prior award number.
- Item 9 Name of Federal Agency:** The awarding Federal agency for this program is the Office of Justice Programs.
- Item 10 Catalog of Federal Domestic Assistance Number:** Enter the five digit number from the Catalog of Federal Domestic Assistance which corresponds to the Federal program which is the source of funding for this project. The number for Correctional Facilities on Tribal Lands grants is 16.596.
- Item 11 Descriptive Title of Applicants Project:** In this space, please enter: (1) a descriptive title of the project to be implemented; (2) the name of the cognizant Federal agency, (this is generally the Federal agency from which the applicant agency receives the largest proportion of its Federal funds); and (3) applicant's fiscal year, i.e. twelve month audit period, (e.g., October 1 to September 30).
- Item 12 Areas Affected by Program:** Identify the geographic area(s) encompassed by the project. Indicate "Statewide" or "National", if applicable.
- Item 13 Proposed Project Dates:** Fill in the proposed beginning and end dates of the project.
- Item 14 Congressional Districts:** Fill in the number of the Congressional Districts in which the project will be located as well as the Congressional District(s) the project will serve. Indicate "Statewide", if applicable.
- Item 15 Estimated Funding:** In line "a," type in the amount of Federal funds requested. Indicate any other resources that will be available to the project and the source of those funds on lines "b-f," as appropriate.
- Item 16 State Executive Order 12372:** Some states (although, not all), require you to submit your application to a State "Single Point of Contact" (SPOC) to coordinate applications for Federal funds within the State. If your State requires a copy of your application, indicate the date this application was submitted. If a copy is not required, indicate the reason. The SPOC is not responsible for forwarding your application to the Federal funding agency.
- Item 17 Delinquent Federal Debt:** This question applies to the applicant organization. Categories of debt include delinquent audit disallowances, loans, and taxes.
- Item 18 Authorized Representative:** Type the name of the person legally authorized to enter into agreements on behalf of your agency. This signature on the original application must be signed in blue ink and/or stamped as "original" to help us distinguish the original from the photocopies.

General Assurances

The applicant hereby assures and certifies compliance with all federal statutes, regulations, policies, guidelines and requirements, including OMB Circulars No. A-21, A-110, A-122, A-133, A-87; E.O. 12372; and Uniform Administrative Requirements for Grants and Cooperative Agreements—28 CFR, Part 66, Common Rule, that govern the application, acceptance and use of federal funds for this federally assisted project. Also the applicant assures and certifies that:

1. It possesses legal authority to apply for the grant; that a resolution, motion or similar action has been duly adopted or passed as an official act of the applicant's governing body, authorizing the filing of the application, including all understandings and assurances contained therein, and directing and authorizing the person identified as the official representative of the applicant to act in connection with the application and to provide such additional information as may be required.
5. It will comply with requirements of the provisions of the Uniform Relocation Assistance and Real Property Acquisitions Act of 1970 (P.L. 91-646) which provides for fair and equitable treatment of persons displaced as a result of federal and federally-assisted programs.
6. It will comply with provisions of federal law which limit certain political activities of employees of a state or local unit of government whose principal employment is in connection with an activity financed in whole or in part by federal grants. (5 U.S.C. 1501, *et seq.*)
7. It will comply with the minimum wage and maximum hours provisions of the federal Fair Labor Standards Act.
8. It will establish safeguards to prohibit employees from using their positions for a purpose that is or gives the appearance of being motivated by a desire for private gain for themselves or others, particularly those with whom they have family, business, or other ties.
9. It will give the sponsoring agency or the Comptroller General, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the grant.
10. It will comply with all requirements imposed by the federal sponsoring agency concerning special requirements of law, program requirements, and other administrative requirements.
11. It will insure that the facilities under its ownership, lease, or supervision which shall be utilized in the accomplishment of the project are not listed on the Environmental Protection Agency's (EPA) list of Violating Facilities and that it will notify the federal grantor agency of the receipt of any communication from the Director of the EPA Office of Federal Activities indicating that a facility to be used in the project is under consideration for listing by the EPA.
12. It will comply with the flood insurance purchase requirements of Section 102(a) of the Flood Disaster Prevention Act of 1973, Public Law 93-234, 87 Stat. 975, approved December 31, 1976. Section 102(1) requires, on and after March 2, 1975, the purchase of flood insurance in communities where such insurance is available as a condition for the receipt of any federal financial assistance for construction or acquisition purposes for any use in any area that has been identified by the Secretary of the Department of Housing and Urban Development as an area having special flood hazards. The phrase "federal financial assistance" includes any form of loan, grant, guaranty, insurance payment, rebate, subsidy, disaster assistance loan or grant, or any other form of direct or indirect federal assistance.
13. It will assist the federal grantor agency in its compliance with Section 106 of the National

Historic Preservation Act of 1966 as amended (16 U.S.C. 470), Executive Order 11593, and the Archeological and Historical Preservation Act of 1966 (16 U.S.C. 569a-1 *et seq.*) by (a) consulting with the State Historic Preservation Officer on the conduct of investigations, as necessary, to identify properties listed in or eligible for inclusion in the National Register of Historic Places that are subject to adverse effects (see 36 CFR Part 800.8) by the activity, and notifying the federal grantor agency of the existence of any such properties by (b) complying with all requirements established by the federal grantor agency to avoid or mitigate adverse effects upon such properties.

14. It will comply, and assure the compliance of all its subgrantees and contractors, with the applicable provisions of Title I of the Omnibus Crime Control and Safe Streets Act of 1968, as amended, the Juvenile Justice and Delinquency Prevention Act, or the Victims of Crime Act, as appropriate; the provisions of the current edition of the Office of Justice Programs Financial and Administrative Guide for Grants (M7100.1); and all other applicable federal laws, orders, circulars, or regulations.
15. It will comply with applicable provisions of 28 CFR related to grants and cooperative agreements including Part 18, Administrative Review Procedure; Part 20, Criminal Justice Information Systems; Part 22, Confidentiality of Identifiable Research and Statistical Information; Part 23, Criminal Intelligence Systems Operating Policies; Part 30, Intergovernmental Review of Department of Justice Programs and Activities; Part 42, Nondiscrimination/ Equal Employment Opportunity Policies and Procedures; Part 61, Procedures for Implementing the National Environmental Policy Act; Part 63, Floodplain Management and Wetland Protection Procedures; and federal laws or regulations applicable to federal assistance programs.
16. It will comply, and all its contractors will comply, with the non-discrimination requirements of the Omnibus Crime Control

and Safe Streets Act of 1968, as amended, 42 U.S.C. 3789(d), or Victims of Crime Act (as appropriate); Title VI of the Civil Rights Act of 1964, as amended; Subtitle A, Title II of the Americans with Disabilities Act (ADA) (1990); Title IX of the Education Amendments of 1972; the Age Discrimination Act of 1975; Department of Justice Non-Discrimination Regulations, 28 CFR Part 42, Subparts C, D, E, and G; and Department of Justice regulations on disability discrimination, 28 CFR Part 35 and Part 39.

17. In the event a federal or state court or federal or state administrative agency makes a finding of discrimination after a due process hearing on the grounds of race, color, religion, national origin, sex, or disability against a recipient of funds, the recipient will forward a copy of the finding to the Office for Civil Rights, Office of Justice Programs.
18. It will provide an Equal Employment Opportunity Program if required to maintain one, where the application is for \$500,000 or more.
19. It will comply with the provisions of the Coastal Barrier Resources Act (P.L. 97-348) dated October 19, 1982 (16 U.S.C. 3501 *et seq.*) Which prohibits the expenditure of most new federal funds within the units of the Coastal Barrier Resources System.



U.S. DEPARTMENT OF JUSTICE
OFFICE OF JUSTICE PROGRAMS
OFFICE OF THE COMPTROLLER

CERTIFICATIONS REGARDING LOBBYING; DEBARMENT, SUSPENSION AND OTHER RESPONSIBILITY MATTERS; AND DRUGFREE WORKPLACE REQUIREMENTS

Applicants should refer to the regulations cited below to determine the certification to which they are required to attest. Applicants should also review the instructions for certification included in the regulations before completing this form. Signature of this form provides for compliance with certification requirements under 28 CFR Part 69, "New Restrictions on Lobbying" and 28 CFR Part 67, "Government-wide Debarment and Suspension (Nonprocurement) and Government-wide Requirements for Drug-Free Workplace (Grants)." The certifications shall be treated as a material representation of fact upon which reliance will be placed when the Department of Justice determines to award the covered transaction, grant, or cooperative agreement.

1. LOBBYING

As required by Section 1352, Title 31 of the U.S. Code, and implemented at 28 CFR Part 69, for persons entering into a grant or cooperative agreement over \$100,000, as defined at 28 CFR Part 69, the applicant certifies that:

(a) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the making of any Federal grant, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal grant or cooperative agreement;

(b) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal grant or cooperative agreement, the undersigned shall complete and submit Standard Form LLL, "Disclosure of Lobbying Activities," in accordance with its instructions;

(c) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subgrants, contracts under grants and cooperative agreements, and subcontracts) and that all sub-recipients shall certify and disclose accordingly.

2. DEBARMENT, SUSPENSION, AND OTHER RESPONSIBILITY MATTERS (DIRECT RECIPIENT)

As required by Executive Order 12549, Debarment and Suspension, and implemented at 28 CFR Part 67, for prospective participants in primary covered transactions, as defined at 28 CFR Part 67, Section 67.510, -

A. The applicant certifies that it and its principals:

(a) Are not presently debarred, suspended, proposed for debarment, declared ineligible, sentenced to a denial of Federal benefits by a State or Federal court, or voluntarily excluded from covered transactions by any Federal department or agency;

(b) Have not within a three-year period preceding this application been convicted of or had a civil judgement rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State, or local)

transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;

(c) Are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (Federal, State, or local) with commission of any of the offenses enumerated in paragraph (1)(b) of this certification; and

(d) Have not within a three year period preceding this application had one or more public transactions (Federal, State, or local) terminated for cause or default; and

B. Where the applicant is unable to certify to any of the statements in this certification, he or she shall attach an explanation to this application.

3. DRUGFREE WORKPLACE (GRANTEES OTHER THAN INDIVIDUALS)

As required by the DrugFree Workplace Act of 1988, and implemented at 28 CFR Part 67, Subpart F, for grantees, as defined at 28 CFR Part 67, Sections 67.615 and 67.620 —

A. The applicant certifies that it will or will continue to provide a drug-free workplace by:

(a) Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the grantee's workplace and specifying the actions that will be taken against employees for violation of such prohibition;

(b) Establishing an ongoing drugfree awareness program to inform employees about —

(1) The dangers of drug abuse in the workplace;

(2) The grantee's policy of maintaining a drugfree workplace;

(3) Any available drug counseling, rehabilitation, and employee assistance programs; and

(4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace;

(c) Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph (a);

(d) Notifying the employee in the statement required by paragraph (a) that, as a condition of employment under the grant, the employee will—

(1) Abide by the terms of the statement; and

(2) Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;

(e) Notifying the agency, in writing, within 10 calendar days after receiving notice under subparagraph (d)(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to: Department of Justice, Office of Justice Programs, ATTN: Control Desk, 633 Indiana Avenue, N.W., Washington, D.C. 20531. Notice shall include the identification number(s) of each affected grant;

(f) Taking one of the following actions, within 30 calendar days of receiving notice under subparagraph (d)(2), with respect to any employee who is so convicted ---

(1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or

(2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;

(g) Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs (a), (b), (c), (d), (e), and (f).

B. The grantee may insert in the space provided below the site(s) for the performance of work done in connection with the specific grant:

Place of Performance (Street address, city, county, state, zip code)

Check ☐ if there are workplaces on file that are not identified here.

Section 67, 630 of the regulations provides that a grantee that is a State may elect to make one certification in each Federal fiscal year. A copy of which should be included with each application for Department of Justice funding. States and State agencies may elect to use OJP Form 4061/7.

Check ☐ if the State has elected to complete OJP Form 4061/7.

DRUG-FREE WORKPLACE (GRANTEES WHO ARE INDIVIDUALS)

As required by the Drug-Free Workplace Act of 1988, and implemented at 28 CFR Part 67, Subpart F, for grantees, as defined at 28 CFR Part 67; Sections 67.615 and 67.620 ---

A. As a condition of the grant, I certify that I will not engage in the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance in conducting any activity with the grant; and

B. If convicted of a criminal drug offense resulting from a violation occurring during the conduct of any grant activity, I will report the conviction, in writing, within 10 calendar days of the conviction, to: Department of Justice, Office of Justice Programs, ATTN: Control Desk, 633 Indiana Avenue, N.W., Washington, D.C. 20531.

As the duly authorized representative of the applicant, I hereby certify that the applicant will comply with the above certifications.

1. Grantee Name and Address:

2. Application Number and/or Project Name

3. Grantee IRS/Vendor Number

4. Typed Name and Title of Authorized Representative

5. Signature

6. Date

DISCLOSURE OF LOBBYING ACTIVITIES

Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352
(See reverse for public burden disclosure)

1. Type of Federal Action: <input type="checkbox"/> a. contract <input type="checkbox"/> b. grant <input type="checkbox"/> c. cooperative agreement <input type="checkbox"/> d. loan <input type="checkbox"/> e. loan guarantee <input type="checkbox"/> f. loan insurance	2. Status of Federal Action: <input type="checkbox"/> a. bid/offer/application <input type="checkbox"/> b. Initial award <input type="checkbox"/> c. post award	3. Report type: <input type="checkbox"/> a. Initial filing <input type="checkbox"/> b. material change For Material Change Only: year _____ Quarter _____ date of last report _____
4. Name and Address of Reporting Entity: <input type="checkbox"/> Prime <input type="checkbox"/> Subawardee Tier _____, <i>if known</i> Congressional District, <i>if known</i> :		5. If Reporting Entity in No. 4 is Subawardee, Enter Name and Address of Prime: Congressional District, <i>if known</i> :
6. Federal Department/Agency: 	7. Federal Program Name/Description: CDFA Number, <i>if applicable</i> : _____	
8. Federal Action Number, if known:	9. Award Amount, if known: \$	
10. a. Name and Address of Lobbying Entity <i>(if individual, last name, first name, MI)</i>	b. Individuals Performing Services <i>(including address if different from No. 10a)</i> <i>(last name, first name, MI)</i>	
11. Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of the fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be reported to the Congress semi-annually and will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.	Signature: _____ Print Name: _____ Title: _____ Telephone No.: _____ Date: _____	
Federal Use Only:		Authorized for Local Reproduction Standard Form - LLL

INSTRUCTIONS FOR COMPLETION OF SF-LLL, DISCLOSURE OF LOBBYING ACTIVITIES

This disclosure form shall be completed by the reporting entity, whether subawardee or prime Federal recipient, at the initiation or receipt of a covered Federal action, or a material change to a previous filing, pursuant to title 31 U.S.C. section 1352. The filing of a form is required for each payment or agreement to make payment to any lobbying entity for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with a Federal action. Use the SF-LLL-A Continuation Sheet for additional information if the space on the form is inadequate. Complete all items that apply for both the initial filing and material change report. Refer to the implementing guidance published by the Office of Management and Budget for additional information.

1. Identifying the type of covered Federal action for which lobbying activity is and/or has been secured to influence the outcome of a covered Federal action.
2. Identify the status of the covered Federal action.
3. Identify the appropriate classification of this report. If this is a follow-up report caused by a material change to the information previously reported, enter the year and quarter in which the change occurred. Enter the date of the last previously submitted report by this reporting entity for this covered Federal action.
4. Enter the full name, address, city, state and zip code of the reporting entity. Include Congressional District, if known. Check the appropriate classification of the reporting entity that designates if it is, or expects to be, a prime or subaward recipient. Identify the tier of subawardee, e.g., the first subawardee of the prime is the 1st tier. Subawards include but are not limited to subcontracts, subgrants and contract awards under grants.
5. If the organization filing the report in item 4 checks "subawardee", then enter the full name, address, city, state and zip code of the prime Federal recipient. Include Congressional District, if known.
6. Enter the name of the Federal agency making the award or loan commitment. Include at least one organizational level below agency name, if known. For example, Department of Transportation, United States Coast Guard.
7. Enter the Federal program name or description for the covered Federal action (item 1). If known, enter the full Catalog of Federal Domestic Assistance (CFDA) number for grants, cooperative agreements, loans, and loan commitments.
8. Enter the most appropriate Federal identifying number available for the Federal action identified in item 1 (e.g., Request for Proposal (RFP) number; Invitation for Bid (IFB) number; grant announcement number; the contract, grant or loan award number; the application/proposal control number assigned by the Federal agency). Include prefixes, e.g., "RFP-DE-90-001".
9. For a covered Federal action where there has been an award or loan commitment for the prime entity identified in item 4 or 5.
10. (a) Enter the full name, address, city, state and zip code of the lobbying entity engaged by the reporting entity identified in item 4 to influence the covered Federal action.

(b) Enter the full names of the individual(s) performing services, and include full address if different from 10 (a). Enter Last Name, First Name, and Middle Initial (MI)>
11. The certifying official shall sign and date the form, print his/her name, title, and telephone number.

Public reporting burden for this collection of information is estimated to average 30 minutes per response including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0046); Washington, D.C. 20503.

Correctional Facilities on Tribal Lands Certification of Intent to Operate

By accepting this assurance as part of the online application process, applicant agency certifies its intent to support, maintain, and operate correctional facilities constructed with grant funds.

Budget Detail Worksheet

Purpose: The Budget Detail Worksheet may be used as a guide to assist you in the preparation of the budget and budget narrative. You may submit the budget and budget narrative using this form or in the format of your choice (plain sheets, your own form, or a variation of this form). However, all required information (including the budget narrative) must be provided. Any category of expense not applicable to your budget may be deleted.

A. Personnel - List each position by title and name of employee, if available. Show the annual salary rate and the percentage of time to be devoted to the project. Compensation paid for employees engaged in grant activities must be consistent with that paid for similar work within the applicant organization.

<u>Name/Position</u>	<u>Computation</u>	<u>Cost</u>
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TOTAL _____

B. Fringe Benefits - Fringe benefits should be based on actual known costs or an established formula. Fringe benefits are for the personnel listed in budget category (A) and only for the percentage of time devoted to the project. Fringe benefits on overtime hours are limited to FICA, Workman's Compensation, and Unemployment Compensation.

<u>Name/Position</u>	<u>Computation</u>	<u>Cost</u>
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TOTAL _____

Total Personnel & Fringe Benefits _____

C. Travel - Itemize travel expenses of project personnel by purpose (e.g., staff to training, field interviews, advisory group meeting, etc.). Show the basis of computation (e.g., six people to 3-day training at \$X airfare, \$X lodging, \$X subsistence). In training projects, travel and meals for trainees should be listed separately. Show the number of trainees and unit costs involved. Identify the location of travel, if known. Indicate source of Travel Policies applied, Applicant or Federal Travel Regulations.

Purpose of Travel	Location	Item	Computation	Cost
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TOTAL _____

D. Equipment - List non-expendable items that are to be purchased. (Note: Organization's own capitalization policy for classification of equipment should be used). Expendable items should be included in the "Supplies" category. Applicants should analyze the cost benefits of purchasing versus leasing equipment, especially high cost items and those subject to rapid technical advances. Rented or leased equipment costs should be listed in the "Contractual" category. Explain how the equipment is necessary for the success of the project. Attach a narrative describing the procurement method to be used.

Item	Computation	Cost
-------------	--------------------	-------------

TOTAL _____

E. Supplies - List items by type (office supplies, postage, training materials, copying paper, and other expendable items such as books, hand held tape recorders) and show the basis for computation. Generally, supplies include any materials that are expendable or consumed during the course of the project.

Supply Items	Computation	Cost
		TOTAL _____

F. Construction - Provide a list and description of all construction costs and how the costs were computed. Construction costs may include site preparation, construction contract costs or building materials and labor, fixed furnishings (built into the structure), perimeter security, water and sewer, road work, etc. It may also include the purchase of a facility or modular unit and renovation costs. Land may not be purchased with grant funds. Consultants such as architects, engineers, or construction managers that are hired outside of the construction contract should be shown in the consultant category. A project manager who is employed by the implementing jurisdiction should be shown in the personnel category.

[illegible]

G. Consultants/Contracts - Indicate whether applicant's formal, written Procurement Policy or the Federal Acquisition Regulations are followed.

Consultant Fees: For each consultant enter the name, if known, service to be provided, hourly or daily fee (8-hour day), and estimated time on the project. Consultant fees in excess of \$450 per day require additional justification and prior approval from OJP.

<u>Name of Consultant</u>	<u>Service Provided</u>	<u>Computation</u>	<u>Cost</u>
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Subtotal _____

Consultant Expenses: List all expenses to be paid from the grant to the individual consultant in addition to their fees (i.e., travel, meals, lodging, etc.)

<u>Item</u>	<u>Location</u>	<u>Computation</u>	<u>Cost</u>
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Subtotal _____

Contracts: Provide a description of the product or services to be procured by contract and an estimate of the cost. Applicants are encouraged to promote free and open competition in awarding contracts. A separate justification must be provided for sole source contracts in excess of \$100,000.

<u>Item</u>	<u>Cost</u>
-------------	-------------

Subtotal _____

TOTAL _____

H. Other Costs - List items (e.g., rent, reproduction, telephone, janitorial or security services, and investigative or confidential funds) by major type and the basis of the computation. For example, provide the square footage and the cost per square foot for rent, and provide a monthly rental cost and how many months to rent.

Description	Computation	Cost
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TOTAL _____

I. Indirect Costs - Indirect costs are allowed only if the applicant has a Federally approved indirect cost rate. A copy of the rate approval, (a fully executed, negotiated agreement), must be attached. If the applicant does not have an approved rate, one can be requested by contacting the applicant's cognizant Federal agency, which will review all documentation and approve a rate for the applicant organization, or if the applicant's accounting system permits, costs may be allocated in the direct costs categories.

Description	Computation	Cost
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TOTAL

Budget Summary - When you have completed the budget worksheet, transfer the totals for each category to the spaces below. Compute the total direct costs and the total project costs. Indicate the amount of Federal requested and the amount of non-Federal funds that will support the project.

Budget Category	Amount
A. Personnel	_____
B. Fringe Benefits	_____
C. Travel	_____
D. Equipment	_____
E. Supplies	_____
F. Construction	_____
G. Consultants/Contracts	_____
H. Other	_____
Total Direct Costs	_____
I. Indirect Costs	_____
TOTAL PROJECT COSTS	_____

Federal Request	_____	(Up to 90% of total costs)
Non-Federal Amount	_____	(At least 10% of total costs)

***Sample Budget Detail
Worksheet***

Sample Budget Detail Worksheet

Purpose: The Budget Detail Worksheet may be used as a guide to assist you in the preparation of the budget and budget narrative. You may submit the budget and budget narrative using this form or in the format of your choice (plain sheets, your own form, or a variation of this form). However, all required information (including the budget narrative) must be provided. Any category of expense not applicable to your budget may be deleted.

(Example assumes a one year budget period and 10% cash match requirement)

A. Personnel - List each position by title and name of employee, if available. Show the annual salary rate and the percentage of time to be devoted to the project. Compensation paid for employees engaged in grant activities must be consistent with that paid for similar work within the applicant organization.

Name/Position	Computation	Cost
John Smith, Investigator	$(\$50,000 \times 100\%)$	\$50,000
2 Investigators	$(\$50,000 \times 100\% \times 2)$	\$100,000
Secretary	$(\$30,000 \times 50\%)$	<u>\$15,000</u>
		\$165,000
Cost of living increase	$(\$165,000 \times 2\% \times .5\text{yr.})$	\$1,650
Overtime per investigator	$(\$37.5/\text{hr} \times 100 \text{ hrs} \times 3)$	\$11,250

The three investigators will be assigned exclusively to homicide investigations. A 2% cost of living adjustment is scheduled for all full-time personnel 6-months prior to the end of the grant. Overtime will be needed during some investigations. A half-time secretary will prepare reports and provide other support to the unit.

TOTAL \$177,900

B. Fringe Benefits - Fringe benefits should be based on actual known costs or an established formula. Fringe benefits are for the personnel listed in budget category (A) and only for the percentage of time devoted to the project. Fringe benefits on overtime hours are limited to FICA, Workman's Compensation, and Unemployment Compensation.

Name/Position	Computation	Cost
Employer's FICA	$(\$177,900 \times 7.65\%)$	\$ 13,609
Retirement	$*(\$166,650 \times 6\%)$	\$ 9,999
Uniform Allowance	$(\$50 \text{ mo.} \times 12 \text{ mo.} \times 3)$	\$ 1,800
Health Insurance	$*(\$166,650 \times 12\%)$	\$ 19,998
Workman's Compensation	$(\$177,900 \times 1\%)$	\$ 1,779
Unemployment Compensation	$(\$177,900 \times 1\%)$	\$ 1,779
* $(\$177,900 \text{ less } \$11,250)$		

TOTAL \$48,964

Total Personnel & Fringe Benefits \$226,864

C. Travel - Itemize travel expenses of project personnel by purpose (e.g., staff to training, field interviews, advisory group meeting, etc.). Show the basis of computation (e.g., six people to 3- day training at \$X airfare, \$X lodging, \$X subsistence). In training projects, travel and meals for trainees should be listed separately. Show the number of trainees and unit costs involved, Identify the location of travel, if known. Indicate source of Travel Policies applied, Applicant or Federal Travel Regulations.

Purpose of Travel	Location	Item	Computation	Cost
Training	Boston	Airfare	(\$150 x 2 people x 2 trips)	\$ 600
		Hotel	(\$75/night x 2 nights x 2 people x 2 trips)	\$ 600
		Meals	(\$35/day x 3 days x 2 people x 2 trips)	\$ 420
Investigations	New York City	Airfare	(\$600 average x 7)	\$4,200
		Hotel &	(\$100/day average x 7 x 3	\$2,100
		Meals	days)	

Two of the investigators will attend training on forensic evidence gathering in Boston in October and January. The investigators may take up to seven trips to New York City to follow up investigative leads. Travel estimates are based upon applicant's formal written travel policy.

TOTAL \$7,920

D. Equipment - List non-expendable items that are to be purchased. (Note: Organization's own capitalization policy for classification of equipment should be used). Expendable items should be included in the "Supplies" category. Applicants should analyze the cost benefits of purchasing versus leasing equipment, especially high cost items and those subject to rapid technical advances. Rented or leased equipment costs should be listed in the "Contractual" category. Explain how the equipment is necessary for the success of the project. Attach a narrative describing the procurement method to be used

Item	Computation	Cost
3 - 486 Computer w/CD ROM	(\$2,000 x 3)	\$6,000
Video Camera		\$1,000

The computers will be used by the investigators to analyze case and intelligence information. The camera will be used for investigative and crime scene work.

TOTAL \$7,000

E. Supplies - List items by type (office supplies, postage, training materials, copying paper, and other expendable items such as books, hand held tape recorders) and show the basis for computation. Generally, supplies include any materials that are expendable or consumed during the course of the project.

Supply Items	Computation	Cost
Office Supplies	(\$50/mo x 12 mo)	\$ 600
Postage	(\$20/mo x 12 mo)	\$ 240
Training Materials	(\$2/set x 500 sets)	\$1,000

Office supplies and postage are needed for general operation of the program. Training materials will be developed and used by the investigators to train patrol officers how to preserve crime scene evidence.

TOTAL \$1,840

F. Construction - Provide a list and description of all construction costs and how the costs were computed. Construction costs may include site preparation, construction contract costs or building materials and labor, fixed furnishings (built into the structure), perimeter security, water and sewer, road work, etc. It may also include the purchase of a facility or modular unit and renovation costs. Land may not be purchased with grant funds. Consultants such as architects, engineers, or construction managers that are hired outside of the construction contract should be shown in the consultant category. A project manager who is employed by the implementing jurisdiction should be shown in the personnel category.

Construction Activities	Computation	Cost
Demolition and Removal		\$ 30,000
Construct new 50 bed unit	\$100 sq. ft X 18,250 sq. ft.	1,825,000
Fixed Furnishings	\$200/bunk X 50 bunks	10,000
	\$1,800 X 1 stove	1,800

The funds will be used to demolish an existing structure and remove the debris, to construct a new 50 bed dormitory style facility with program and administrative space and to install fixed furnishings.

The renovations are needed to upgrade the forensic lab used to analyze evidence for homicide cases.

TOTAL \$1,866,800

G. Consultants/Contracts - Indicate whether applicant's formal, written Procurement Policy or the Federal Acquisition Regulations are followed.

Consultant Fees: For each consultant enter the name, if known, service to be provided, hourly or daily fee (8-hour day), and estimated time on the project. Consultant fees in excess of \$450 per day require additional justification and prior approval from OJP.

Name of Consultant	Service Provided	Computation	Cost
John Doe	Forensic Specialist	(\$150/day x 30 days	\$4,500
John Doe, Forensic Specialist, will be hired, as needed, to assist with the analysis of evidence in homicide cases.			
			Subtotal <u>\$4,500</u>

Consultant Expenses: List all expenses to be paid from the grant to the individual consultant in addition to their fees (i.e., travel, meals, lodging etc.)

Item	Location	Computation	Cost
Airfare	Miami	\$400 x 6 trips	\$2,400
Hotel and Meals		(\$100/day x 30 days)	\$3,696
Joe Doe is expected to make up to 6 trips to Miami to consult en homicide cases.			
			Subtotal <u>\$5,400</u>

Contracts: Provide a description of the product or services to be procured by contract and an estimate of the cost, Applicants are encouraged to promote free and open competition in awarding contracts. A separate justification must be provided for sole source contracts in excess of \$100,000.

Item	Cost
Intelligence System Development	\$102,000
The State University will design an intelligence system to be used in homicide investigations. A sole source justification is attached. Procurement Policy is based on the Federal Acquisition Regulation.	
	Subtotal <u>\$102,000</u>
	TOTAL \$111,900

H. Other Costs - List items (e.g., rent, reproduction, telephone, janitorial or security services, and investigative or confidential funds) by major type and the basis of the computation. For example, provide the square footage and the cost per square foot for rent, and provide a monthly rental cost and how many months to rent.

Description	Computation	Cost
Rent	(700 sq. ft. x \$15/sq. Ft.) (\$875 mo. x 12 mo.)	\$10,500
This rent will pay for space for the new homicide unit. No space is currently available in city owned buildings.		
Telephone	(\$100/mo. x 12)	\$ 1,200
Printing/Reproduction	(\$150/mo. x 12)	\$ 1,800
		TOTAL <u>\$13,500</u>

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Description	Computation	Cost
10% of personnel and fringe benefits	(\$226,864 x 10%)	\$22,686
The indirect cost rate was approved by the Department of Transportation, the applicant's cognizant Federal agency on January 1, 1994. (A copy of the fully executed, negotiated agreement is attached.)		
		TOTAL <u>\$22,686</u>

Budget Summary - When you have completed the budget worksheet, transfer the totals for each category to the spaces below. Compute the total direct costs and the total project costs. Indicate the amount of Federal requested and the amount of non-Federal funds that will support the project.

Budget Category	Amount	
A. Personnel	<u>\$ 177,900</u>	
B. Fringe Benefits	<u>\$ 48,964</u>	
C. Travel	<u>\$ 7,920</u>	
D. Equipment	<u>\$ 7,000</u>	
E. Supplies	<u>\$ 1,840</u>	
F. Construction	<u>\$ 1,866,800</u>	
G. Consultants/Contracts	<u>\$ 111,900</u>	
H. Other	<u>\$ 13,500</u>	
Total Direct Costs	<u>\$ 379,024</u>	
I. Indirect Costs	<u>\$ 22,686</u>	
TOTAL PROJECT COSTS	<u>\$2,235,824</u>	
Federal Request	<u>\$2,235,824</u>	(Up to 90% of total project costs)
Non-Federal Amount	<u>\$ 223,582</u>	(At least 10% of total project costs)

U. S. Department of Justice
Office of Justice Programs

Washington, D.C. 20531

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